

Follow-Up and Clarification After Today's Appointment With Dr. Jicha Involving Defamation, Mischaracterization, and Further Falsification Attempts

Date: 2025-09-18

RE: Follow-Up and Clarification After Today's Appointment With Dr. Jicha
Dr. Jicha,

For the record:

Before today's visit I provided you with a detailed message (Sept. 17, 10:29–10:39 AM) listing urgent items that required documentation, referrals, and follow-up. These included:

- FDG-PET results showing cortical hypometabolism with possible frontotemporal involvement – which I had tried to reach you about for months but was not ever able to get an appointment scheduled as evidenced by the attached MyChart messaging.
- Clarification of spinal lesions (T7/T8 and L2) as new, not congenital – as in my medical record they are listed fraudulently as being present since birth.
- Repeated abnormal labs requiring Infectious Disease evaluation for which I have received no treatment.
- NeuroQuant from 2022 findings showing volumetric atrophy especially with the frontal parenchyma total volume coming in at the 2nd Normative Percentile and total brain volume coming in at the 9th Normative Percentile done by Northwest Radiology in Indiana who

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properly ran a NeuroQuant MRI on site with the software— discussion in depth and invalidation of 2024 NeuroQuant due to situation involving Pro Scan Imaging's inability to run NeuroQuant with data later run through unknown system leading to skewed results.

- Clarification of the “bone cancer” chart entry — who entered it, when, why, and on what basis. I have never been told I had bone cancer, so this appears to be a falsification or a serious unexplained error, or even worse a hidden diagnosis that I was never informed about and with treatment withheld – I need to know accurate and truthful information.
- Referrals to Behavioral/Cognitive Neurology (for worsening cognitive dysfunction), Neurosurgery/Spine Oncology (for the tumors), Infectious Disease (for ongoing unmet infection needs), Hematology (regarding infusions of iron and copper), and Vascular Surgery (to follow up on CRPS related and chronic venous insufficiency related topics).
- Outstanding testing: repeat FDG-PET (including spine – due to tumors), lumbar puncture with testing prior-noted, repeat NeuroQuant at a certified facility such as Northwest Radiology, MRI with CSF protocol ordered in late 2024 but not done by UK Radiology, brainstem MRI, repeat transcranial Doppler to monitor progress of low blood flow at both ICA Terminus points and on the right at P1 PCA, biopsy or PET/MRI correlation of new spinal lesions, repeat bone marrow biopsy to see if any dysplasia had developed since 2017 in which results

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showed abnormalities but not enough to classify MDS at that time, and copper infusions.

- QEEG not done – only EEG – despite my understanding of you ordering a QEEG earlier in the year.

Despite this list of very serious medical problems, very little, if any of these items at all, were addressed.

Instead, the meeting was focused on misrepresentations of my character, defamatory inferences, and an attempt to impose a “behavioral contract” based on fraudulent information that I immediately and expressly rejected.

This constitutes intimidation and avoidance of addressing urgent medical findings.

Yesterday Krystle told me this appointment would be to go over results and discuss options regarding brain hypometabolism.

Instead, I was provided no guidance / zero guidance on serious, objective, documented findings — including hypometabolism, advancing brain atrophy, multiple new spinal tumors, hematologic abnormalities, and ongoing copper deficiency (for which I have received infusions for over 3 years, now, yet withheld by UK Clinic also – while my Copper level remains low). Copper assists in the delivery of oxygen – this is a very serious and problematic denial for UK Clinic, and is harming me daily, further.

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The other denials of care and refusals, are also very serious, and leave me in a difficult and precarious position in terms of trying to preserve my life itself. This leaves a misleading and incomplete record in my chart. To correct this, I require:

1. Written documentation in my chart acknowledging each item listed above, with specific answers.
2. A clear statement of which referrals, tests, and treatments will be ordered — and, if not, an explicit written denial for each, including the name of the clinician assuming responsibility for such denial.

This is necessary for protection and advocacy for my life and my child's life (JAF), who carries the same TNFRSF13B c.542C>A mutation in heterozygous form.

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Finally, I request that a formal complaint regarding your conduct be created and that I be provided with the direct contact information for your supervisor, and how to contact them in writing per my ADA Accommodations, which I have attached again to this letter.

I am documenting this now to prevent further misrepresentation and/or further falsification of my medical record.

I am entitled to truthful and complete documentation of all objective testing and medical findings, as well as treatment options.

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Sincerely,

/s/ John R. Fouts

John R. Fouts, MBA

Son of a Vietnam-War-Era Veteran

Founder, Upward Spirals Association (508(c)(1)(A) Spiritual Faith-Based Organization – Protected under RFRA)

Federal SSA SSDI Recipient – Protected under ADA, VAWA, Section 504, and 1915(c)

Mainstream Voucher Holder – HUD/IHCDA/CASI Program

Email: icreateupwardspirals@gmail.com

Alternate: torchoftruth@zohomail.com

Phone (Text Only – ADA Accommodation): 502.956.0052

Voice calls & voicemails will be ignored

Fax (HIPAA Compliant): 604.641.2805

Evidence archive (prior to block on saving):

<https://archive.org/details/@jfouts1979>

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